## DEPARTMENT OF SOCIAL SERVICES

744 P Street, Sacramento, CA 95814



June 21, 1991

ALL-COUNTY LETTER NO. 91-54

TO: ALL COUNTY WELFARE DIRECTORS

SUBJECT: ANNUAL REFUGEE ASSISTANCE BY NATIONALITY REPORT

REFERENCE: ALL-COUNTY LETTER NO. 84-35

This letter is to request the submission of the Refugee Assistance by Nationality Report, Form RS 238. All Counties are required to submit this report on an annual basis.

As in the past, Counties should report the country of origin for all time-eligible refugees by the type of aid they receive as of June 30, 1991.

The enclosed form and reporting instructions are once again provided to assist you in completing the form. Since a revision of this form is not available at this time, Counties are advised that they need not complete the GA column, since GA is no longer federally reimbursed.

Reports must be mailed no later than July 15, 1991 to:

Department of Social Services Statistical Services Bureau 744 P Street, M.S. 19-81 Sacramento, CA 95814

If you have any questions regarding this report or need additional copies of the form, please have your staff contact Ms. Valerie Maulet, Statistical Services Bureau, at (916) 323-5087 or ATSS 473-5087.

DENNIS J. BOYLE Deputy Director

Enclosure

cc: CWDA

# REFUGEE ASSISTANCE BY NATIONALITY ANNUAL REPORT — (Persons Only)

SEND ONE COPY TO:
Department of Social Services
Statistical Services Bureau
744 P Street, M.S. 19-81
Sacramento, CA 95814

COUNTY	STATE USE ONLY COUNTY	
REPORT PERIOD	-	

COUNTRY OF ORIGIN		MEDI-CAL		
	AFDC	RCA	GA	ONLY
TOTAL				
1. CAMBODIA				10.40.40.40.40.40.40.40.40.40.40.40.40.40
2. LAOS (INCLUDING HMONG)				
3. VIETNAM				
4. SOVIET UNION (U.S.S.R.)				
5. POLAND				
6. OTHER EASTERN EUROPEAN COUNTRIES				
7. CUBA				
8. AFGHANISTAN	N. A. S.			
9. IRAN				
10. IRAQ				
11. ETHIOPIA				
12. OTHER				

COMMENTS

PERSON TO CONTACT REGARDING THIS REPORT	TELEPHONE NUMBER	DATE
	j	

# ANNUAL REPORT REFUGEE ASSISTANCE-BY-NATIONALITY (FORM RS 238)

#### CONTENT

This report provides for the collection and reporting of yearly statistical information by county welfare departments which administer the refugee program under the supervision of the California Department of Social Services. Information is to be collected on time-eligible refugees participating in the following programs: Aid to Families with Dependent Children (AFDC), Refugee Cash Assistance (RCA), General Assistance (GA) and Medi-Cal Only.

#### **PURPOSE**

The statistical information collected on this report is used by the Refugee and Immigration Programs Branch to meet federal requirements for data collection and to refine the estimates of refugee populations.

Additionally, this report provides legislators, administrators and other interested persons with information regarding the refugee programs.

## DISTRIBUTION

Information in this report is compiled and distributed yearly to the Federal Department of Health and Human Services, state program managers, county welfare departments and other interested agencies and individuals.

#### REPORT PERIOD

The report date is June 30 of each year. The information should identify only the ending caseload (by persons -- not cases) for the month of June.

#### **DUE DATE**

The reports are to be received in Sacramento by the fifteenth calendar day of July following the June report month. Mail the report to:

Department of Social Services Statistical Services Bureau 744 P Street, MS 19-81 Sacramento, CA 95814

#### **COLUMN DEFINITIONS**

Country of Origin: The country of origin means the country of citizenship, not necessarily the country from which the refugee arrived. The countries listed in this column are those with the largest number of refugee arrivals in the United States in the recent past.

Cash Assistance: Self-explanatory. Under the Cash Assistance column, information is collected on refugees receiving three types of aid: AFDC, RCA and GA.

Medi-Cal Only: Number of persons eligible only for medical assistance.

#### LINE ITEM DEFINITIONS

These are self-explanatory, with the following clarifications:

Line Item 2: For the purposes of this report, the Laos nationality grouping will include Hmong.

Line Item 6: Other Eastern European countries will include all other Eastern European countries not listed on the report form. These will include Romania, Hungary, Bulgaria and Czechoslovakia.

Line Item 7: The entry under Cuba is not to include Cuban-Haitians.

Line Item 12: The "Other" line item is explained in the Column Instructions Section of these instructions.

# **COLUMN INSTRUCTIONS**

Line Item 12: If a particular nationality is less than 5 percent of the total refugee welfare population, include those counts in Line Item 12.

Blank Line: Identify the country(ies) of origin not listed in Line Items 1 through 11 from which 5 percent or more of your country's refugee welfare recipients came.

Cash Assistance: Enter for each country listed the number of time-eligible refugees (persons, not cases) within your caseload who are receiving public assistance under the AFDC, RCA or GA programs for whom ORR reimbursement is being claimed. U.S. born babies within a refugee filing unit should be included in all categories.

Medi-Cal Only: Enter for each country listed the number of persons eligible only for Medi-Cal Assistance. Do <u>not</u> include those persons receiving a combination of Cash Assistance and Medi-Cal since these persons should be counted under the Cash Assistance column only.